

**Little Rays Afterschool Services Record Card (Confidential)**

**Childs Name:** \_\_\_\_\_ **Date of Birth** \_\_\_\_\_

**Home Address:** \_\_\_\_\_

**Parent / Guardian**

**Name:** \_\_\_\_\_ **Name:** \_\_\_\_\_

**Contact No:** \_\_\_\_\_ **Contact No:** \_\_\_\_\_

**Email:** \_\_\_\_\_

**Person authorized to collect child (other than Parents)** \_\_\_\_\_

**Nominated Emergency Person:** \_\_\_\_\_

**Does your child suffer from any medical conditions, allergies or specific dietary needs:**  
\_\_\_\_\_

**Accident and /or Emergency Consent Form**

I/We \_\_\_\_\_ parent /guardian of \_\_\_\_\_ give permission to the management of Little Rays Afterschool Service to act on my behalf in case of emergency or accident and to take such action as may be necessary for the benefit of my child. This decision is to be taken by the staff person in charge at the time of the emergency.

**Signed:** \_\_\_\_\_ **Parent/Guardian** **Date:** \_\_\_\_\_

**Permission to be photographed/video recorded in the care of the Afterschool Service Staff.**

I/we hereby give permission for \_\_\_\_\_ (childs Name) to be photographed or video recorded under the supervision of the childcare staff. Photographs may be used for display/promotional materials. Videos may be used by staff for observation, planning purposes, staff training and for open days. Staff may also keep written records of observations for planning purposes.

**Permission for walking Trips:** I/we hereby give permission for \_\_\_\_\_ (childs Name) to go on walking trips to the local shop / church grounds.

**Playstation Use (4<sup>th</sup>,5<sup>th</sup> & 6<sup>th</sup> class only)** I/we give permission for \_\_\_\_\_ (childs name) to play the Playstation at Afterschool.

**Data Protection:** I give permission to Little Rays Afterschool to hold the above personal information: this information will not be shared with any unauthorised third party.

**Signed:** \_\_\_\_\_ **Parent**